

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND 10/523271											
1 Date of Request: <u>07/01/05</u>		2 Serial/Patent # <u>10/523271</u>									
3 Please ^{charge} refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$ <u>200.00</u>							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
7 TOTAL AMOUNT OF REFUND			\$ <u>200.00</u>								
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
	Overpayment	Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">5</td></tr></table>			1	9	--	0	0	6	5
1	9	--	0	0	6	5					
	No Fee Due (Explanation):	Search fee charged to deposit account									
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME:		TITLE: <u>Paralegal</u>									
SIGNATURE: <u>Winston A. ...</u>		PHONE: <u>703-308-9140 Ext. 200</u>									
OFFICE: <u>National Stage Processing</u>											
OFFICE: <u>Paralegal Specialist</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: